

## ACCESS ACKNOWLEDGMENT AND LICENSE RECOMMENDATION FORM

P-Number: (S/N 09/597,105)

Agency: Air Force

Receipt Date:

Referral Date: 8/24/00

I hereby acknowledge as indicated by my signature on this form that I have inspected this application in administration of 35 U.S.C. 181 and 35 U.S.C. 184 on the behalf of the Agency specified below. I promise not to divulge any information from this application for any purpose other than administration of 35 U.S.C. 181 and 35 U.S.C. 184.

**Recommendation:**

(e.g. License Recommended (LR))

Reviewer(s) Signature/Agency

LR	James J. Gindert 8/29/00 AFMC LO/JAZ
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**Instructions to Reviewers:**

1. All individuals reviewing this application are required under 35 U.S.C. 181 to sign and date this form regardless of whether they are making a license recommendation.
2. The attached copy of this application, any copies made therefrom and this form must be returned to the PTO once a recommendation not to license has been made.

**Time for Completion of Review:**

The application will be licensed in the absence of any recommendation not to license the application anytime after 90 days from the "Date Referred" as indicated at the top of this form.

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